

## **Application Data Sheet**

### **Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: FUSIBLE BUNG FOR LIQUID TANKS

Attorney Docket Number:: AMI P-3003-3

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 2

Total Drawing Sheets:: 2

Small Entity:: Yes

Latin Name::

Variety denomination name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Secrecy Order in Parent Appl.?::

### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: George  
Middle Name:: P.  
Family Name:: Stolzenfeld  
Name Suffix::  
City of Residence:: Fenton  
State or Province of Residence:: MI  
Country of Residence:: US  
Street of mailing address:: 1108 Lake Valley Drive

City of mailing address:: Fenton  
State or Province of mailing address:: MI  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 48430

Applicant Authority type::  
Primary Citizenship Country::  
Status::  
Given Name::  
Middle Name::  
Family Name::  
Name Suffix::  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::

City of mailing address::

State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::

Applicant Authority type::  
Primary Citizenship Country::  
Status::

Given Name::  
Middle Name::  
Family Name::  
Name Suffix::  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::

City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 29318  
Name::  
Street of mailing address::

City of mailing address::  
State or Province of mailing address:  
Postal or Zip Code of mailing address:  
Phone Number::

Fax Number::

E-Mail address::

### Representative Information

Representative Customer Number:: 23399

Representative Designation::	Registration Number::	Representative Name::

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional of	60/446,465	2/11/03

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::